

STATE OF CALIFORNIA DEPARTMENT OF MOTOR VEHICLES

LESSOR-RETAILER SURETY BOND

DMV USE ONLY				
OL OR ACCOUNT NUMBER				
NAME				

LIFORN	(Vehicle Code Section 11612)	NAME	
Licensing Operations I Occupational Licensing	g Branch	Bond Number	SURETY USE ONLY
P.O. Box 932342, MS: Sacramento, CA 94232		Premium Amount	SURETY USE ONLY
KNOW ALL PERSONS E	BY THESE PRESENTS:		SURETY USE ONLY
That we,	PRINCIPAL NAME(S) AND DBA		
doing business as a lessor-	retailer whose address for service is	OR-RETAILER SERVICE ADDRESS	
	as PRINCIPAL, and		
a corporation organized ur	nder the laws of	ON	_ and authorized to transact a
	the State of California, whose address for service is		
g		SURETY SERVICE ADDR	ESS
administrators, successors	sum of FIFTY THOUSAND DOLLARS (\$50,000), for wh and assigns jointly and severally, firmly by these presents. The box 11612, Vehicle Code, requires that the Principal file or have compared to the control of the contro	oond term shall begin on	BOND EFFECTIVE DATE
	on 11612, Venicle Code, requires that the Principal file or have cand tendered in accordance therewith.	on file with the Department a	bond in the sum of \$50,000
representation which will	RE, the conditions of the foregoing obligation are that if the Princause a monetary loss to a purchaser, seller, financing agency, on 11711, then this obligation is to be void; otherwise it is to remark	r governmental agency; and,	
PROVIDED HOW	EVER, this bond is issued subject to the following express condi	tions:	
period for which the	d shall be deemed continuous in form and shall remain in full for the license is granted and each and every succeeding license per y hereunder shall cease except as to any liability or indebtedness	iod or periods for which said	d Principal may be licensed,
	d is executed by the Surety to comply with Chapter 3.5 (comme part 2, Code of Civil Procedure and said bond shall be subject to	-	
(3) The aggr	regate liability of the Surety hereunder on all claims whatsoever s	hall not exceed the penal sun	n of this bond in any event.
(4) This bon part 2, Code of Civ	d may be cancelled by the Surety in accordance with Article 13 vil Procedure.	(commencing with section	996.310), chapter 2, title 14,
section 995.010), t	ety, its successors and assigns, are jointly and severally liable on itle 14, part 2, Code of Civil Procedure and Chapter 3.5 (commen	ncing with section 11600), Di	vision 5, Vehicle Code.
995.010), title 14, j	cipal and Surety may be served with notices, papers and other part 2, Code of Civil Procedure at the addresses given above.	•	· -
	er penalty of perjury, under the laws of the State of California alf of the surety under an unrevoked power of attorney.	that the foregoing is true ar	nd correct. The undersigned
Executed at	X SIGNATURE C	DF ATTORNEY-IN-FACT	
On (Date)			

PRINTED OR TYPED NAME OF ATTORNEY-IN-FACT

INSTRUCTIONS FOR COMPLETING THE SURETY BOND FOR AN OCCUPATIONAL LICENSE APPLICATION

The surety must complete the bond as follows to meet the department's regulatory requirements.

Bond Number: Enter the bond number. The bond number and the principal name should be included on all correspondence to the department.

Premium Amount: Enter the premium amount.

Principal Name(s) and DBA (doing business as): Enter the true, full name of the Principal DBA(s) which must match the names as presented on the application submitted to the department. When the Principal is a:

- **Sole Owner** List the true, full name of that person and each DBA name(s).
- *Partnership* List the true, full name of each partner and each DBA name(s).
- *Limited Liability Company* List the true, full name of the limited liability partnership or company and each DBA name(s).
- *Corporation* List the true, full name of the corporation and each DBA name(s) as filed and registered with the California Secretary of State; include the assigned registration number.
- Association List the true, full name of the association and each DBA name(s).

A surety bond will not be accepted unless it is issued in the true full name of the occupational licensee as presented on the application. When the name of the Principal is the same as the DBA name, only list the Principal's name.

Lessor-Retailer Service Address: Enter the address at which the principal may be served with notices, papers, and other documents related to this bond.

Surety Name: Enter the true, full name as filed with the Department of Insurance. A surety issuing the bond must be an admitted surety insurer authorized to transact business in California.

State of Incorporation: Enter the state or country where the surety company's incorporation documents are filed.

Surety Service Address: Enter the address where legal documents may be served on the surety.

Bond Effective Date: Enter the month, day and year of the bond effective date.

Executed at: Enter the city and county where the bond is signed.

On (date): Enter the month, date and year when the bond is signed.

Signature of Attorney-in-Fact: Sign the true, full name of the person who represents and is authorized to sign for the surety company.

Printed or Typed Name of Attorney-in-Fact: Enter the true, full name of the person signing on behalf of the surety company.